PTO/SB/17 (10-07)
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Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriatons Act, 2005 (H.R. 4818).	**Complete if Known**	
FEE TRANSMITTAL **For FY 2008**	Application Number	10/538,730
	Filing Date	06/13/2005
	First Named Inventor	GUERRET, O.
☐ Applicant claims small entity status. See 37 CFR 1.27	Examiner Name	Bernshteyn, Michael
	Art Unit	1796
TOTAL AMOUNT OF PAYMENT ($) **$810.00**	Attorney Docket No.	FR-AM1907NP

METHOD OF PAYMENT (check all that apply)

☐ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): _____

☒ Deposit Account   Deposit Account Number: **01-2717**   Deposit Account Name: _____

For the above-identified deposit account, the Director is hereby authorized to: (check all that apply)

☒ Charge fee(s) indicated below   ☐ Charge fee(s) indicated below, **except for the filing fee**

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FEE CALCULATION

1. BASIC FILING, SEARCH, AND EXAMINATION FEES

	FILING FEES		SEARCH FEES		EXAMINATION FEES		
Application Type	Fee ($)	**Small Entity** Fee ($)	Fee ($)	**Small Entity** Fee ($)	Fee ($)	**Small Entity** Fee ($)	Fees Paid($)
Utility	310	155	510	255	210	105	_____
Design	210	105	100	50	130	65	_____
Plant	210	105	310	155	160	80	_____
Reissue	310	155	510	255	620	310	_____
Provisional	210	105	0	0	0	0	_____

2. EXCESS CLAIM FEES

Fee Description	Fee ($)	**Small Entity** Fee ($)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	210	105
Multiple dependent claims	370	185

Total Claims		Extra Claims	Fee ($)		Fee Paid ($)	**Multiple Dependent Claims** Fee ($)	Fee Paid ($)
_____	- 20 or HP =	_____ x	**$50.00**	=	**$0.00**	_____	_____

HP = highest number of total claims paid for, if greater than 20.

Indep. Claims		Extra Claims	Fee ($)		Fee Paid ($)
_____	- 3 or HP =	_____ x	**$210.00**	=	**$0.00**

HP = highest number of independent claims paid for, if greater than 3.
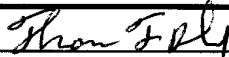
3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is $260 ($130 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets		Extra Sheets		Number of each additional 50 or fraction thereof		Fee ($)		Fee Paid ($)
_____	- 100 =	**0**	/ 50	**0**	(round up to a whole number) x	**$260.00**	=	**$0.00**

4. OTHER FEE(S)

Non-English specification, $130 fee (no small entity discount)

	Fee Paid ($)
Other (e.g., late filing surcharge): **Request for Continued Examination (RCE) fee**	**$810.00**

SUBMITTED BY

Signature	*[signature]*	Registration No. (Attorney/Agent)	**42,110**	Telephone	**215-419-7314**
Name (Print/Type)	**Thomas F. Roland**			Date	**June 25, 2008**